

Central MRS Meeting
Forsyth County Health Department
March 29, 2006

Counties Present: Alamance, Chatham, Davidson, Forsyth, Guilford, Mecklenburg, Montgomery, Orange, Person, Randolph, Rockingham, Rowan, Stokes, Surry, Union, Yadkin

Community Partners:

Rainbow Center (IFPS, Reunification)
Martin County Community Action (IFPS, Reunification)
Deep River Mediation Svcs.
Orange Co Family Resource Center

Introductions

Who
Where
What
Collaborative Efforts

Training Update

Cornerstone III
Policy Training

Lets Talk Collaboration

Yadkin moved WF under Child Welfare Supervision so they share common children caseloads. Have incorporated Shared Parenting in their MAPP classes.

Forsyth collaborate with school by contracting school social workers whenever they get a report and school SW can share any information that they have.

Randolph - just starting to share common case info with WF and CPS (Holly said they had 70+ community members at a meeting yesterday!) Supervisor has noticed that CPS and WF workers are spending more time in each others offices. They had a training session where they told each side what the other did and services/benefits can be offered from each side. A lot of folks were surprised.

Rockingham staffings now include WF, talk on a regular basis. Have outside agencies (MH, DV) come to staffings.

Union good collaboration, have been doing this awhile.

Montgomery - staffings with CPS and other economic services units.

Surry pretty well within agencies, now WF and CPS feel more comfortable contacting each other.

Stokes have orientation to make other parts of agency familiar with each other.

Guilford PACE team a protocol to interact with the different disciplines within the agency. Keep in good contact with Chamber of Commerce so that they are aware of economic trends.

Davidson joint staffings.

Person check for common cases, sometimes do home visits together so that the case plans can match and the family may already be comfortable with one social worker and they can introduce the other.

Rowan beginning to implement, will have CPS use WF as collateral contact on all referrals

Mecklenburg co-located people in the same building for the first time and have done some joint home visits.

Orange Co FRC collaborate closely with other community organizations

Orange Co DSS collaborate closely with day care unit, have created school social worker positions, so that when case is open for CPS use the same case plan. (Going to start having the WF workers use the same case plan as well.) Have also brought the at risk case managers over to the economic services side. Opened a JobLinks center in Chapel Hill that includes about 10 agencies so customers only have to go to one place. Work closely with Health Department maternity coordinator so that clients can get the services they need.

Rainbow Center provide community services, collaborate with all the appropriate public agencies, JCPC, DSS, MH

Martin County Community Action IFPS, RU, recently got a referral from WF

Alamance good job with collaboration, had a economic services person actually go to CPS for a couple of months. Going to revamp Success meetings to be more like CFTs.

Deep River Mediation in Chatham County do mediation in schools, etc. Will do CFTs in Chatham.

Chatham - will work with whoever will work with them, WF is two doors down the hall.

Training Update

- As of April 15th Cornerstone 3 will be blended. DSS has worked to blend the two so there is one training. The first 2 days were the same anyway. The practice day was the one that was different. To blend these, AFI has made a self study guide to ensure that you will know what you need to know and have some practice still at the training. Courtney said there will be some homework assignments so that they can maximize the training experience, so people should be prepared. And, don't expect the attendees to go to training and then go to work at 4pm!! The homework is short (45 mins) but they will need to do it. If you have been to 3B and you now realize that you really need 3A because you are going to be doing family assessments, you can use the self study guide and not have to go to this training again (will still need MRS policy training). Self study guide on the web.

Policy training dates:

- 5/3 Rowan
- 5/9 Black Mtn Library
- 5/10 - Edgecombe Co (getting full, may add one more, but not for sure)
- If you want to go just call Holly and give her a number of participants so she has enough training materials. These are the last policy trainings that are planned for some time. Hope to have Cornerstone blended into Pre-Service by the end of the calendar year. If anyone thinks you will need more, let Holly know ASAP.

April Meeting dates

- 4/21 Lenoir Co
- 4/25 Henderson Co
- 4/26 Cabarrus Co
- 4/28 Alamance original 10 meeting

Question was asked about emailing to check for open cases in the other disciplines.

- The counties that do this, just do that and if there is an open case they can get the worker who is working with that family. Some other counties have one case so they don't have to email but they automatically check it to see who is on the open case rosters.

Asked could something be done in DataWarehouse that would tie in WF and CPS.

- Problem is that CPS enters no data until the end of the assessment when the 5104 is keyed so there is no data to access. Also, we have to protect the confidentiality of the Central Registry. The burden has to be on the CPS side, because they have input no data on day one, but they can look to see if there is WF info there. Can't really be done well on a state level, but different counties have developed a system that works for their county.

One county copies their CPS intake sheet each day and gives it to an identified WF intake person so that individual can check on the list for WF cases. Automation can help with this, but it can't do it all there will have to be some human interaction to make this happen well.

Couple of counties have CPS folks that have helped to develop the WF plan for the county.

What is the wish list for collaboration?

- Breakdown the wall of confidentiality within the agency. Most things you can share. CPS can't share who the reporter was but WF does not need to know that. They don't need to know how many bruises, but they can know what in general is going on? County asked if they had to have a release of information just to talk to each other within the agency (i.e. what are the recommendations, are the folks going to their appointments.) Look at it from this point (Keith said). The DSS director is responsible for all the programs, and all the agency employees work for that one person, so they can share. Use some common sense, and share on a need to know basis, but you can do that within the agency. If someone does divulge information inappropriately, that is a personnel matter, not a collaboration and sharing issue.

Collaboration b/w WF and CPS gives you the biggest bang for the buck.

- It doesn't cost anything, it provides more information for both sides, and you then have support you are not the only one working with the family, and especially if you do joint visits, you cut out any conflicting information provided by the family and wasting time trying to clarify what is really going on.

Medical documentation that child had failure to thrive, because of HIPPA, can she share that from WF to CPS?

- Suggestion is to make the release say XXX Department of Social Services, not the specific department (WF or CPS), then it will cover the whole agency. People think that HIPPA allows you to share within the agency but not to report out to another agency.

Need to share because otherwise you are wasting resources doubling up on referrals or searching out information.

If there is a finding of services needed, that qualifies for CPS daycare.

Can outside agencies attend Cornerstone 3 trainings? Holly will check.

Collaboration will work differently in different counties, each county will have to talk internally and figure out what things will work for their individual situation.

Guilford PACE monthly all parts of agencies come together and meet sometimes with lunch or breakfast. Making the informal connections makes it easier to come around the corner and talk with that worker later on. They started with the managers and supervisors, if they are not talking, you can't expect the social workers to do so.

How are counties deciding who attends these monthly MRS meetings? Do the same people come (or from the same team) or do you rotate and allow everyone to come occasionally?

- Holly heard that some of the WF people that came at the beginning that it wasn't work their time because most of the things were CPS. She is not sure how to address the CPS needs, and include WF in every aspect. We do value and appreciate them, but there are areas of CPS that are more immediate than the big picture which is where the WF piece comes in. One of the WF workers said that even if the meeting does not touch on WF at all, it is helpful to them to see what CPS does so that they can understand what the client goes through when CPS comes into their lives.

The time commitment to get to know each other is hard to work in at first but it is something that will pay off at the end.

Talked about what IFPS is and how it can help DSS workers not only work with families they are involved with but help DSS workers in different areas get to know each other.

- Basically, families that have had a substantiation or are in need of services and are also high or intensive risk (or are substantiated abuse at any risk level). The IFPS visits by the worker can count for some of the CPS worker visits if the family is in 215. Suggestion by Rainbow Center was that everyone figure out at least one IFPS worker in their area. Contact Heather for more information on the requirements for qualifying for services.

Success multiple disciplinary approach to responding to a family's situation so that they can meet their goals. Each discipline has some input on a particular aspect of the plan.